									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR									D 10/621902					
Effective January 1, 2003									A-US 1200 300 8249					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	NTITY	OR	OTHER SMALL I			
TOTAL CLAIMS			24				ſ	RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			2 4 minus 20=		• 4		·	X\$ 9=		OR	X\$18=	77		
INDEPENDENT CLAIMS			9 minus 3 = *					X42=		OR	X84=			
MU ·	LTIPLE DEPEN	DENT CLAIM PI	RESENT					.+140=-			+280=			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL	322		
CLAIMS AS AMENDED - PART II 1115/											OTHER			
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL	,	OR L	SMALL	ADDI-		
AMENDMENT A		REMAINING AFTER AMENDMENT		NÚM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE		
	Total	* 2	Minus	** 2	24	=	1	X\$ 9=	1	OR	X\$18=			
	Independent	* 3	Minus	***	3	=		X42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						]				.000			
:		4510					١	+140=		OR	+280=			
							TOTAL ADDIT. FEE		OR	ADDIT. FEE				
_	: :	١.		<u> </u>										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	ŀ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 21	Minus	** 6	24	=	11	X\$ 9= .		OR	X\$18=			
ME	Independent	. 3	Minus	***	3		] ]	X42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=			
	TOTAL									OR OR	TOTAL			
								ADDIT. FEE	<u> </u>	JUN	ADDIT. FEE			
_		(Column 1)			mn 2)	(Column 3)	١,				·			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
N N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18≐			
WE	Independent	*	Minus	***		= _	11	X42=		OR	X84=			
匚	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u> </u>	١.	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+28U=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEOR														
	The "Highest Nur	nber Previously Pa	id For* (Total o	r Indepen	dent) is the	e highest numb	er foi	und in the a		x in c	olumn 1.			